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The following program information is excerpted from the Office of Program Policy Analysis and Governmental Accountability (OPPAGA) website, as of September 21, 2001:

Program Purpose: The mission of the Medical Quality Assurance program is to regulate health care practitioners to protect the public from harm that may arise from the acts or omissions of incompetent, unethical, or impaired practitioners.

Program Description: The Department of Health's Medical Quality Assurance (MQA) Program regulates health care practitioners as part of the department's goal of protecting the health and safety of persons who access health care services. Regulation of health care professionals is intended to ensure that practitioners meet minimum standards for their profession. Practitioners must demonstrate their proficiency by meeting certain testing, licensing, credentialing and continuing education requirements. In addition to its licensure activities, the program administers activities related to investigating complaints and taking disciplinary action against practitioners. The program is also responsible for maintaining a database on the professional credentials of licensed practitioners for use by health care entities, such as hospitals and HMOs. The program maintains a second database of practitioner profiles for consumer access. Practitioner profiles contain information about the person's educational and professional background and report any disciplinary action taken against the practitioner within the past 10 years.

Professional Licensing Boards and Councils. In Florida, most health care practitioners are governed by a professional licensing board or council comprised of persons licensed to practice in the profession, and consumers. The boards and councils are independent entities assigned to the Department of Health for administrative purposes. The department's program provides staff support for the day-to-day operations of the professional licensing boards and councils. The program also directly regulates some practitioner groups that are not governed by an external board or council, as well as some health care facilities, such as pharmacies. Currently, the Program supports licensure and disciplinary activities for over 40 health care boards, councils, professions and facilities (see the program's List of Regulated Health Professions). Regulatory responsibilities include:

- setting licensing requirements for the profession;
- establishing standards of professional practice;
- verifying applicant credentials (credentialing);
- preparing and administering licensing examinations;
- issuing and renewing members' licenses; and
- curtailing unlicensed activity.

Information about the professional licensing boards and councils, including board membership, minutes of board meetings, the board's meeting schedule and other information is available on the MQA web site

by clicking on the appropriate profession in the List of Regulated Health Professions: This site also contains information on each profession's licensure process, including licensure requirements, application deadlines, and exam schedules and fees. Post-licensure requirements, such as continuing education and license renewal requirements are also provided.

Disciplinary Action. As part of their regulatory function, the professional licensing boards and councils hear cases against individual practitioners who have allegedly violated state laws and rules governing professional practice. If a board finds that an allegation is justified, it may take disciplinary action. Disciplinary measures can range from a reprimand and fines to suspension or revocation of the practitioner's license. Florida's Medical Quality Assurance program reports disciplinary actions taken against doctors, nurses, psychologists and selected other medical professionals to several national and federal professional governing boards. These reports are confidential. However, consumers may submit a Public Information Request form to the MQA program for documents concerning a board's disciplinary action.

Enforcement Activities. The Medical Quality Assurance program is responsible for health care practitioner enforcement activities, including consumer complaint, investigative, and legal services. The program carries out its enforcement function through the Agency for Health Care Administration (AHCA) which serves as the program's agent for providing information to consumers and assisting consumers in filing complaints. The Consumer Services Unit Call Center is the major point of intake for consumer complaints about health care practitioners in Florida. Staff in the unit's Call Center provide callers with the information and forms necessary to file a complaint. The center's toll free phone number is (888)/419-3456.

AHCA staff analyze complaints and reports of potential misconduct, and investigate allegations of improper or unethical activity, as appropriate. AHCA staff also provide legal services for case resolution. The boards and councils determine whether there is probable cause for disciplinary action and are responsible for taking disciplinary action against licensees (see FGAR Profile on Health Care Practitioner Regulation).

Unlicensed Activity. The unlicensed practice of a health care profession is a criminal activity that poses a risk to Florida health care consumers. The Department of Health has taken responsibility for investigating unlicensed activity through the creation in 1998 of the Office of Unlicensed Activity in South Florida. The South Florida office handles an estimated 50% of unlicensed activity complaints, while AHCA staff investigates unlicensed activities covering the rest of the state. Since its creation in 1998 through March 2001, the Office of Unlicensed Activity has investigated 690 complaints resulting in 74 arrests.

In 1998, the Florida Legislature enacted two initiatives: physician credentialing and practitioner profiling. Under the state's credentialing

requirements (s. 456.047, Florida Statutes), the Medical Quality Assurance program collects and stores data about the professional credentials of physicians, chiropractors, and other designated medical professionals. The core credentialing data includes the person's education, training, licensure, certifications, health care affiliations, and evidence of financial responsibility. The database also provides information on malpractice claims, disciplinary actions and Medicaid sanctions taken against the practitioner. Providers who participate in the CoreSTAT program can refer any requests for their credentials to the Department of Health.

Practitioner profiles include information obtained from physicians, podiatrists, chiropractors, and osteopathic physicians at the time of licensure or license renewal as well as information about the practitioner's educational and professional background, including a description of any final disciplinary actions taken against him or her within the last 10 years by the profession's regulatory agency or board. Profiles can be accessed on MQA's Physician Profiling website.

Licensure information on individual practitioners is available through the Internet at the Medical Quality Assurance Program's "Health Care Provider Look-up" website. Consumers can use the site to access information about a practitioner's license status (active, inactive, etc.) as well as any disciplinary or other board action taken to limit the licensee's authority to practice or to suspend or cancel the license.

Financial Resources. Health care practitioners fund most of the cost to regulate their respective professions by paying various fees to their regulating entity. The fees and fines assessed against practitioners, facilities, and businesses are deposited into the Medical Quality Assurance Trust Fund.

Fiscal Year 2000-2001 Legislative Appropriation. The 2001 Legislature appropriated \$33,156,196 in Medical Quality Assurance Trust Funds and \$123,817 in general revenue for program operations in Fiscal Year 2001-2002. The Legislature also authorized 305 full-time equivalent positions for the Medical Quality Assurance program.

Legislative Appropriations	2001-02
<i>General Revenue</i>	\$125,817
<i>Trust Funds</i>	\$33,156,196
<i>Total</i>	\$33,282,013

Source: General Appropriations Fiscal Year 2001-2002.

Staff Resources

Staffing	2001-02
<i>FTE Staff</i>	305.00

Source: General Appropriations Fiscal Year 2001-2002.

Trust Fund. The Medical Quality Assurance Trust Fund, through the licensure fees assessed to the different health care professions, pays for the state's medical quality assurance programs. While a number of the individual boards have operated in cash deficits, until recently the unexpended portion of the trust fund increased incrementally each year. Since 1997 a number of activities, for example the credentialing and profiling systems, have consumed the trust fund cash balance. Recent estimates suggest that the trust fund will move into a deficit during Fiscal Year 2002-03. The Auditor General's staff and the Senate Fiscal Policy Council both recently examined the pending deficit in the MQA trust fund. Their reports are linked below.

Credentialing and Profiling. The credentialing program, known as CoreSTAT, has faced significant criticism since its creation. Industry representatives (mainly hospitals and health maintenance organizations) and have expressed frustration that much of the information is not primary source verified and therefore not useful to their organizations. They complained that the information was often inaccurate as well. Users objected when the program began charging a fee to access the system. The profile system faces a problem similar to the credentialing system because profile information is self-reported by the physician and is not verified by MQA. The next step in expanding the profile system is to add Advanced Registered Nurse Practitioners who were included in the profile system by the 2000 Legislature.

On-line Licensure Renewal. The Medical Quality Assurance program has piloted an on-line licensure renewal project for registered nurses that is currently being expanded to include licensed practical nurses. They anticipate a number of cost savings through on-line renewal. E-renewal provides a cost savings because workload is reduced, renewal notices can be printed on-line avoiding returned notices that were mailed to an incorrect address, cost and workload associated with bad checks is avoided, and funds are received by the state more quickly than traditional methods.

2001 Update

The 2001 Legislature passed SB 1558 (Laws of Florida, 2001-277), a broad ranging bill that addressed a number of medical quality assurance issues. The bill includes cost-saving changes to ensure the integrity and

stability of the Medical Quality Assurance Trust Fund. It establishes a \$250 fee and biennial renewal fee for continuing education providers that will be used to establish an electronic continuing education tracking system. The bill includes a six-year statute of limitations on the filing of a disciplinary complaint against a health care practitioner. The six-year limitation does not affect complaints that involved criminal actions, the diversion of controlled substances, sexual misconduct, or impairment by the licensee.

The 2001 Legislature also mandated OPPAGA to study the feasibility of maintaining the entire Medical Quality Assurance function, including enforcement, within a single department. The study must be completed and a report issued no later than November 30, 2001. In addition, the law requires the Auditor General to conduct a follow-up study on the pending deficit in the MQA trust fund.

Related Reports and Information

OPPAGA Reports

OPPAGA is conducting a comprehensive evaluation of the DOH Medical Quality Assurance program. Results of this review are expected December 1, 2002. For additional information about OPPAGA reports concerning health care practitioner regulation can be obtained from the OPPAGA reports website.

Related Reports

Senate Committee on Fiscal Policy. Analysis of Medical Quality Assurance Trust Fund Fee Schedules and Trust Fund Balances, November 2000.

Auditor General. Operational Audit of Medical Quality Assurance, November 2000.